BEST AVAILABLE COFT									Application or Docket Number				
	PATENT A	APPLICATIO Effect											
			09785515										
		(Colu	mn 2)		SMALL E	INTITY	OR	OTHER SMALL					
TOTAL CLAIMS							1	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			54 minus 20=		. 34			X\$ 9=		OR	X\$18=	612	
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=		OR	X80=	160,00	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	270	
• 11	th difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	1489		
CLAIMS AS AMENDED - PART II									<u> </u>	•	OTHER	THAN	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							,	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total :	. 55	Minus	F	54	= 1		X\$ 9=	·. • ÷	 OR	X\$18=	1-8	
	Independent	م ا	Minus		5	=		X40=		OR	X80=	86	
	FIRST PHESE	NTATION OF MI	OCTIPLE DE	ENDEN	CLAIM		J	+135=		OR	+270=		
				1	110	ALAU	ĺ	TOTAL		₹	TOTAL	10 4	
				(2)	11	110	(ADDIT. FEE	<u> </u>	OR	ADDIT, FEE	<i>()</i> (
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 1		1 4001	,		400)	
AMENOMENT B		REMAINING AFTER AMENDMENT	· · · · · ·	PREVI	ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 55	Minus	1	<u> 25</u>	=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	*** (O AINA	<u> </u>	4	X40=		OR	X80=	.:	
<u> </u>	TINST PRESE	NIATION OF MI	OLITE DE	CHUCH	COAIN		נ	+135=		OR	+270=		
							,	TOTAL ADDIT, FEE		OR	YOTAL ADDIT, FEE		
		(Column_1)		(Colu	mn 2)	(Column 3)				_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total -		Minus	••		=] [X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	•••		*		X40=	1		X80=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM					OR			
		• is to ** **				h 2		+135=		OR	+270=		
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE													
		imber Previously P mber Previously Pa					er fou	und in the a	opropriate bo	x in co	lumn 1,		